Chapter you are filing under:	
☐ Chapter 7	
☐ Chapter 11	
☐ Chapter 12	
■ Chapter 13	☐ Check if this ar amended filing
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Clifford First name  E. Middle name  Block Last name and Suffix (Sr., Jr., II, III)		Florida First name  M. Middle name  Wilson Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6503	,	xxx-xx-2845

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	536 Narragansett Drive Tallmadge, OH 44278	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Summit County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1	or 1 Clifford E. Block
Debtor 2	or 2 Florida M. Wilson

Case number (if known)

Part	Tell the Court About	our Ba	nkruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Ch	apter 7					
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		■ Ch	apter 13					
8.	How you will pay the fee		about how yo	u may pay. Typi attorney is subm	cally, if you are paying the fee you	with the clerk's office in your local court for more details irself, you may pay with cash, cashier's check, or mone f, your attorney may pay with a credit card or check with		
					allments. If you choose this options (Official Form 103A).	n, sign and attach the Application for Individuals to Pay		
			I request that but is not req applies to you	nt my fee be wai uired to, waive y ur family size and	ived (You may request this option our fee, and may do so only if you d you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judge may r income is less than 150% of the official poverty line th installments). If you choose this option, you must fill out al Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes			<b>NA</b> //	One country		
			District			Case number		
			District		When When	Case number		
			District		vvnen	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	3.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to I	ine 12.				
	restuence :	☐ Yes	. Has yo	ur landlord obta	ined an eviction judgment against	you and do you want to stay in your residence?		
				No. Go to line 1	12.			
				Yes. Fill out <i>Init</i> bankruptcy peti		udgment Against You (Form 101A) and file it with this		

	otor 1 Clifford E. Block otor 2 Florida M. Wilson				Case number (if known)
Par	Report About Any Bu	sinesses	You Owr	ı as a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name		
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, Stat	e & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ir	ndicate that you are a low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am ı	not filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code
					ramour, onoci, only, orace a zip oode

Debtor 1 Clifford E. Block
Debtor 2 Florida M. Wilson

Case number (if known)

#### Part 5:

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

	Clifford E. Block Florida M. Wilson	Case number (if known)	
Part 6:	Answer These Questions for Panarting Burneses		

t 6: Answer These Quest	ions for Re	porting Purposes							
What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."								
		□ No. Go to line 16b.							
		Yes. Go to line 17.							
		6b. <b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
		☐ No. Go to line 16c.							
		☐ Yes. Go to line 17.							
	16c.	State the type of debts you ow	ve that are not consumer debts	or business debt	s				
Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	7. Go to line 18.						
Do you estimate that after any exempt					excluded and administrative expenses				
administrative expenses		□ No							
are paid that funds will be available for distribution to unsecured creditors?		□ Yes							
How many Creditors do	<b>1</b> 1 10		П 1 000-5 000	Г	☐ 25,001-50,000				
you estimate that you	■ 1-49 □ 50-99		☐ 5001-10,000		□ 50,001-100,000				
owe:			10,001-25,000	[	☐ More than100,000				
How much do you					□ \$500,000,001 - \$1 billion				
be worth?					☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
					☐ More than \$50 billion				
How much do you					☐ \$500,000,001 - \$1 billion				
to be?					☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
	,	. ,			☐ More than \$50 billion				
t 7: Sign Below									
you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.								
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.								
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
	bankruptc								
	/s/ Cliffo								
	Executed	August 2, 2017 MM / DD / YYYY	Executed	d on August :					
	Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  How many Creditors do you estimate that you owe?  How much do you estimate your assets to be worth?  How much do you estimate your liabilities to be?	What kind of debts do you have?  16a.  16b.  16c.  16c.  16c.  No.  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  How many Creditors do you estimate that you owe?  1-49  50-99  100-19  200-99  How much do you estimate your assets to be worth?  1-49  50-99  100-19  200-99  100-19  200-99  1100-09  150-00  \$100,00	What kind of debts do you have?    16a.	What kind of debts do you have?    16a.	What kind of debts do you have?    Same   Section   Sect				

Debtor 1	Clifford E. Block	
Debtor 2	Florida M. Wilson	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jamie M. N	lagle	Date	August 2, 2017		
Signature of Atto	orney for Debtor		MM / DD / YYYY		
Jamie M. Nag	le				
Printed name					
Amourgis & A	ssociates				
Firm name					
3200 W. Mark	et Street, Suite 106				
Akron, OH 44	,				
Number, Street, City,	State & ZIP Code				
Contact phone 33	0-535-6650	Email address	bk_department@amourgis.com		
0075205					
Bar number & State					

Fill	in this information to identify your cas	e:			
Deb	otor 1 Clifford E. Block				
	First Name	Middle Name	Last Name		
	otor 2 Florida M. Wilson	MCddle News	Last Name		
(Spo	ouse if, filing) First Name	Middle Name	Last Name		
Unit	ted States Bankruptcy Court for the: N	ORTHERN DISTRICT OF O	HIO		
Cas	se number				
	nown)			☐ Chec	k if this is an
				amen	ded filing
Of	ficial Form 106Sum				
		d Liahilities and C	ertain Statistical Information		12/15
			ling together, both are equally responsible f		
info	rmation. Fill out all of your schedules f	irst; then complete the info	rmation on this form. If you are filing amend		
your	r original forms, you must fill out a new	Summary and check the b	oox at the top of this page.		
Par	t 1: Summarize Your Assets				
				V	
				Your a	of what you own
	0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	400A (D)			•
1.	Schedule A/B: Property (Official Form 1a. Copy line 55, Total real estate, from	106A/B) Schedule A/B		\$	110,480.00
					<b>5</b> 2 222 <b>5</b> 4
	1b. Copy line 62, Total personal propert	y, from Schedule A/B		\$	50,030.74
	1c. Copy line 63, Total of all property on	Schedule A/B		\$	160,510.74
Par	t 2: Summarize Your Liabilities				
				Vour	iabilities
					nt you owe
2.	Schedule D: Creditors Who Have Claim	s Secured by Property (Office	ial Form 106D)		
۷.			ttom of the last page of Part 1 of Schedule D	\$	160,426.00
3.	Schedule E/F: Creditors Who Have Uns	ecured Claims (Official Form	106F/F)		
Э.	3a. Copy the total claims from Part 1 (p	riority unsecured claims) from	m line 6e of Schedule E/F	\$	300.00
	3b. Copy the total claims from Part 2 (n	onpriority unsecured claims)	from line 6j of Schedule E/F	\$	15,339.22
	65. Copy 1.10 total ola 1.10 1.10 1.11 1.11 2 (	onpriority unlessured signification			10,000.22
			Your total liabilities	•	176 06E 22
			Tour total nabilities	Φ	176,065.22
Par	t 3: Summarize Your Income and Ex	penses			
4.	Schedule I: Your Income (Official Form			•	E 207 90
	Copy your combined monthly income from	om line 12 of Schedule I		\$	5,207.80
5.	Schedule J: Your Expenses (Official For			•	2.057.00
	Copy your monthly expenses from line 2	22c of Schedule J		\$	3,057.00
Par	t 4: Answer These Questions for Add	ministrative and Statistical	Records		
6.	Are you filing for bankruptcy under C	hapters 7, 11, or 13?			
		-	his box and submit this form to the court with yo	our other sc	hedules.
	■ Vaa				
7.	■ Yes What kind of debt do you have?				
٠.	mat kind of debt do you liave:				
			are those "incurred by an individual primarily for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information
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the court with your other schedules.

page 1 of 2

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,945.18

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
From Fait 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	300.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,731.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	4,031.00

Debtor	this information	n to identify	your case and th	ils tiling:				
		ifford E. B		N	LastName			
Debtor		st Name <b>orida M. V</b>		Name	Last Name			
(Spouse,		st Name		Name	Last Name			
United	l States Bankrupt	tcy Court for	the: NORTHER	N DISTR	RICT OF OHIO			
Case r	number							☐ Check if this is an
								amended filing
<b>∪</b> π: •	sial Farms	4 O C A /E	,					
	cial Form		_					
	redule A				only once. If an asset fits in more than one			12/15
nforma Answer	tion. If more spac every question.	e is needed,	attach a separate sh	neet to th	narried people are filing together, both are is form. On the top of any additional pages			
Part 1:	Describe Each F	Residence, B	uilding, Land, or Otl	her Real I	Estate You Own or Have an Interest In			
. Do yo	ou own or have ar	ny legal or ed	quitable interest in a	ny reside	ence, building, land, or similar property?			
	o. Go to Part 2.							
■ Ye	es. Where is the p	roperty?						
1.1				What i	is the property? Check all that apply			
5	36 Narragans			What i	is the property? Check all that apply Single-family home			aims or exemptions. Put
5	36 Narragansetreet address, if availa		scription	What i ■		the amount	of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> .
5			scription	•	Single-family home	the amount	of any secure	d claims on Schedule D:
5			scription		Single-family home Duplex or multi-unit building	the amount Creditors W	of any secure n/ho Have Clair	d claims on Schedule D: ns Secured by Property.
<b>5</b>			scription 44278-0000	■ □ □	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secure ho Have Clain lue of the	d claims on Schedule D:
5 St	treet address, if availa	ble, or other des			Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the amount Creditors W  Current val entire prop	of any secure ho Have Clain lue of the	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
<b>5</b>	treet address, if availa	ble, or other des	44278-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	Current valentire prop	of any secured the Have Clair the Have of the herty?  0,480.00  ne nature of y	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$110,480.00  our ownership interest
<b>5</b>	treet address, if availa	ble, or other des	44278-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	Current valuentire prop \$11  Describe the (such as feet)	of any secured the Have Clair the Have of the herty?  0,480.00  ne nature of y	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$110,480.00
<b>5</b>	treet address, if availa	ble, or other des	44278-0000	■	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	Current valuentire prop \$11  Describe the (such as feet)	of any secured the Have Clair lue of the lerty?  0,480.00  ne nature of your simple, tense), if known.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$110,480.00  our ownership interest
5 St	treet address, if availa	ble, or other des	44278-0000	■	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  as an interest in the property? Check one	Current valentire prop \$11  Describe the (such as fealife estate)	of any secured the Have Clair lue of the lerty?  0,480.00  ne nature of your simple, tense), if known.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$110,480.00  our ownership interest
5 St	treet address, if availa	ble, or other des	44278-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Las an interest in the property? Check one Debtor 1 only	Current valentire prop \$11  Describe the (such as fer a life estate) Fee Sim	of any secured the Have Clair due of the perty?  0,480.00  ne nature of yes simple, tende), if known.  ple	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$110,480.00  our ownership interest ancy by the entireties, or
5 St	treet address, if availa  allmadge ity	ble, or other des	44278-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  as an interest in the property? Check one Debtor 1 only Debtor 2 only	Current valentire prop \$11  Describe th (such as fe a life estate Fee Sim	of any secured the Have Clair due of the perty?  0,480.00  ne nature of yes simple, tende), if known.  ple	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$110,480.00  our ownership interest
5 St T Ci	treet address, if availa  allmadge ity	ble, or other des	44278-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current valentire prop \$11  Describe tt (such as fe a life estate Fee Sim	of any secured the Have Clair the Ha	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$110,480.00  our ownership interest ancy by the entireties, or
5 St T Ci	treet address, if availa  allmadge ity	ble, or other des	44278-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ite	Current valentire prop \$11  Describe tt (such as fe a life estate Fee Sim	of any secured the Have Clair the Ha	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$110,480.00  our ownership interest ancy by the entireties, or
T Ci	treet address, if availa  allmadge ity	ble, or other des	44278-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Lass an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iterty identification number:	Current valentire prop \$11  Describe tt (such as fe a life estate Fee Sim	of any secured the Have Clair the Ha	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$110,480.00  our ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debte Debte		Clifford E. Bl Florida M. W			Case number (if known)	
3. <b>Ca</b>	rs, vans	, trucks, tract	ors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
	Yes					
3.1	Make:	Chevrolet	<u>t</u>	Who has an interest in the property? Check one		cured claims or exemptions. Put y secured claims on Schedule D:
	Model:	Traverse		Debtor 1 only	Creditors Who Ha	ave Claims Secured by Property.
	Year:	2016	27.250	Debtor 2 only	Current value of	
		mate mileage:	27,358	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		☐ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$25,014	4.00 \$25,014.00
3.2	Make:	Nissan		Who has an interest in the property? Check one		cured claims or exemptions. Put y secured claims on Schedule D:
	Model:	Sentra		Debtor 1 only	Creditors Who Ha	ave Claims Secured by Property.
	Year:	2012	440.000	Debtor 2 only	Current value of	
		mate mileage: formation:	110,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Otherin	iioiiiatioii.		☐ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$5,289	9.00 \$5,289.00
5 Ac	ges you	i have attache	ed for Part 2. Write to			\$30,303.00
Do y	ou own	or have any le	egal or equitable int	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> :	<i>kamples:</i> No	I goods and fu Major appliand escribe	urnishings ces, furniture, linens	china, kitchenware		
				et, 2 Bedroom Sets, Kitchenette, Sofa, 2 ove, Dishwasher, Washer/Dryer, Microwads		\$3,000.00
	No	Televisions ar		eo, stereo, and digital equipment; computers, prir ledia players, games	nters, scanners; music o	collections; electronic devices
			E TVo. Comin - 1	Sustama		¢4 E00 00
			5 TVs, Gaming	Systems		\$1,500.00

	ebtor 1 ebtor 2	Clifford E. Block Florida M. Wilson Case number (if known)	
8.	Exampl	bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or other collections, memorabilia, collectibles  Describe	baseball card collections;
9.	Exampl  No	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and musical instruments  Describe	kayaks; carpentry tools;
		Misc. Carpentry Tools	\$1,500.00
	■ No □ Yes. Clother Examp	es: Pistols, rifles, shotguns, ammunition, and related equipment  Describe	
		Misc. Clothes and Shoes	\$500.00
12	□ No	Viles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold Describe  Wedding Ring, Rings, Necklaces, Bracelets, Earrings, Watches	, silver\$700.00
13	Examµ ■ No	rm animals  les: Dogs, cats, birds, horses  Describe	
14	■ No	ner personal and household items you did not already list, including any health aids you did not list  Give specific information	
15		he dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$7,200.00
		scribe Your Financial Assets	Current value of the
יט	o you ov	n or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No	les: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
		Cash	\$15.00

Debtor 2				Case number	(if known)			
	institution		savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar s. If you have multiple accounts with the same institution, list each.					
	) 98		Institution na	ame:				
		17.1. Checking	Chase Bar	nk	\$1,200.00			
		17.2. Checking	PNC Bank	3	\$14.00			
	amples: Bond fun	ls, or publicly traded sto ds, investment accounts	ocks with brokerage firms, mone	ey market accounts				
□Y€	es	Institution or	issuer name:					
	nt venture	stock and interests in i	incorporated and uninco	rporated businesses, including a	an interest in an LLC, partnership, and			
■ Ye	es. Give specific	information about them Name of entity:		% of owners	hip:			
		checking acco	se of Ohio, LLC. Asse ount at Chase Bank, 5 ps, Buckets, Cleaning	Backpack	% \$4,000.00			
Neg Nor ■ No	gotiable instrume n-negotiable instr o	nts include personal chec	er negotiable and non-ne cks, cashiers' checks, prom nnot transfer to someone b	gotiable instruments hissory notes, and money orders. by signing or delivering them.				
Exa ■ No	<b>D</b>	in IRA, ERISA, Keogh, 40	01(k), 403(b), thrift savings	accounts, or other pension or prof	it-sharing plans			
□Y€	es. List each acco	ount separately.  Type of account:	Institution na	ame:				
You Exa	or share of all unu Camples: Agreeme			nue service or use from a company tric, gas, water), telecommunication				
■ No	o es		Institution na	ame or individual:				
	•	et for a periodic payment o	of money to you, either for	life or for a number of years)				
■ No	o es	Issuer name and descrip	otion.					
26 U	.S.C. §§ 530(b)(1	ation IRA, in an account 1), 529A(b), and 529(b)(1)		gram, or under a qualified state t	uition program.			
■ No	o es	Institution name and des	scription. Separately file the	e records of any interests.11 U.S.C	. § 521(c):			
	•	future interests in prop	perty (other than anything	g listed in line 1), and rights or po	owers exercisable for your benefit			
■ No		information about them						

	ebtor 1 ebtor 2	Clifford E. BI Florida M. W			Case number (if known)	
26.	_Examp			de secrets, and other intellectual ebsites, proceeds from royalties and		
	■ No □ Yes.	Give specific info	ormation abou	t them		
	Examµ ■ No	es, franchises, a ples: Building perr Give specific info	nits, exclusive	licenses, cooperative association h	noldings, liquor licenses, professional license	es
М	oney or	property owed to	o you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to yo	ou			
	■ No □ Yes.	Give specific info	rmation about	them, including whether you alread	dy filed the returns and the tax years	
	Examp ■ No	support  bles: Past due or I	·	ony, spousal support, child support	, maintenance, divorce settlement, property	settlement
	Exam <sub>p</sub> ■ No		es, disability in paid loans you	surance payments, disability benefi made to someone else	its, sick pay, vacation pay, workers' comper	nsation, Social Security
		sts in insurance poles: Health, disab		urance; health savings account (HS	SA); credit, homeowner's, or renter's insurar	ice
		Name the insurar	nce company o Compan	of each policy and list its value. y name:	Beneficiary:	Surrender or refund value:
				al Life Insurance Policy with nancial	Daughter	\$7,298.74
			Term L Allstate	fe Insurance Policy with	Children	\$0.00
	If you a some o		y of a living tru	you from someone who has died ist, expect proceeds from a life insu	rance policy, or are currently entitled to rece	eive property because
33.	Claims	against third pa	rties, whethe	er or not you have filed a lawsuit of putes, insurance claims, or rights to		
	_	Describe each cl	aim			
				Auto Accident occurred in A Attorney is Chester Law Gro OH 44320.	April, 2017. Personal Injury Dup, 430 White Pond Drive, Akron,	Unknown

Debi	tor 1 tor 2	Clifford E. Block Florida M. Wilson		Case number (if known)	
34. <b>C</b>	Other o	contingent and unliquidated claims of every nature, inc	cluding counterclaims	of the debtor and rights to set o	ff claims
	No				
	Yes.	Describe each claim			
35. <b>/</b>	Any fin	ancial assets you did not already list			
	No				
	l Yes.	Give specific information			
36.		he dollar value of all of your entries from Part 4, includent 4. Write that number here	0 ,		\$12,527.74
Part	5: Des	scribe Any Business-Related Property You Own or Have an In	terest In. List any real esta	ate in Part 1.	
37. <b>D</b>	o you c	own or have any legal or equitable interest in any business-rel	ated property?		
	No. Go	to Part 6.			
	Yes. G	So to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property Yo ou own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
46. <b>[</b>	Do you	own or have any legal or equitable interest in any farr	n- or commercial fishir	g-related property?	
	-	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
		have other property of any kind you did not already lie les: Season tickets, country club membership	st?		
	No				
	Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$110,480.00
56.		t: Total vehicles, line 5	\$30,303.00	<del></del>	ψ.10,400.00
57.		: Total personal and household items, line 15	\$7,200.00		
58.	Part 4	: Total financial assets, line 36	\$12,527.74		
59.	Part 5	i: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+ \$0.00		
62.	Total	personal property. Add lines 56 through 61	\$50,030.74	Copy personal property total	\$50,030.74
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$160,510.74
				L	

pg 18 of 18 56021750

Order No.: Loan No.:



#### **Exhibit A**

The following described property:

Situated in the City of Tallmadge, County of Summit, and State of Ohio:

Known as being Lot 79, Section A in village green subdivision no. 2, as recorded in plat book 69, pages 1-5 of Summit County, Ohio records. Be the same more or less, but subject to all legal highways.

Assessor's Parcel No: 60-03438

Fill in this informa				
Debtor 1	Clifford E. Block First Name	Middle Name	Last Name	
Debtor 2	Florida M. Wilson	Middle Name	Lastivallie	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO	
Case number				☐ Check if this is an amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

			and the second s	
1.	Which set of exemptions ar	e vou claiming? Check one only	v. even if vour spouse is	filina with vou.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
536 Narragansett Drive Tallmadge, OH 44278 Summit County	\$110,480.00		\$273,850.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
Permanent Parcel No.: 6003438 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(1)
2016 Chevrolet Traverse 27,358 miles	\$25,014.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Line from <i>Schedule FAB</i> . <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	2020:00(/ )/(2)
2012 Nissan Sentra 110,000 miles Line from Schedule A/B: 3.2	\$5,289.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
			100% of fair market value, up to any applicable statutory limit	( // /
Living Room Set, 2 Bedroom Sets, Kitchenette, Sofa, 2 TV Stands,	\$3,000.00		\$3,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Refrigerator, Stove, Dishwasher, Washer/Dryer, Microwave, Misc. Household Goods Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
5 TVs, Gaming Systems	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line nom <i>Gonedale AVD.</i> 1.1			100% of fair market value, up to any applicable statutory limit	2023.00(A)(4)(a)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Case number (if known)

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	vn		Specific laws that allow exemption	
	Misc. Carpentry Tools Line from Schedule A/B: 9.1	\$1,500.00	•	\$1,250.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
	Ellie II olii ooliloodio 702. GT			100% of fair market value, up to any applicable statutory limit	2020.00(/1)(10)	
	Misc. Clothes and Shoes Line from Schedule A/B: 11.1	\$500.00	-	\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
				100% of fair market value, up to any applicable statutory limit		
	Wedding Ring, Rings, Necklaces, Bracelets, Earrings, Watches	\$700.00	•	\$700.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
	Line from Schedule A/B: <b>12.1</b>			100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1	\$15.00		\$15.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
				100% of fair market value, up to any applicable statutory limit		
	Checking: Chase Bank Line from Schedule A/B: 17.1	\$1,200.00		\$935.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
				100% of fair market value, up to any applicable statutory limit		
	Checking: Chase Bank Line from Schedule A/B: 17.1	\$1,200.00		\$265.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
				100% of fair market value, up to any applicable statutory limit		
	Checking: PNC Bank Line from Schedule A/B: 17.2	\$14.00		\$14.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
				100% of fair market value, up to any applicable statutory limit		
	Universal Life Insurance Policy with Voya Financial	\$7,298.74		\$7,298.74	Ohio Rev. Code Ann. § 3923.19(A)	
	Beneficiary: Daughter Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	, ,	
	Term Life Insurance Policy with Allstate	\$0.00		\$0.00	Ohio Rev. Code Ann. § 3923.19(A)	
	Beneficiary: Children Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	,	
	Auto Accident occurred in April, 2017. Personal Injury Attorney is	Unknown		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(12)(c)	
	Chester Law Group, 430 White Pond Drive, Akron, OH 44320. Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of more than \$160,375?  (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)  □ No					
	Yes. Did you acquire the property covered No	ed by the exemption wi	thin 1	,215 days before you filed this case	?	
	□ Yes					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 2

Debtor 1 Clifford E. Block Trans turns Plorida M. Willson Debtor 2 Florida M. Willson Cosceros In lings Provide M. Middle Norne Load Norne Under States Bankruptcy Court for the:  Case number  (# recent)    Check if this is a namended filing  Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more appearance of the control of the control of the together in the top of any additional Pages, write your name and case  1, 0 any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing elies to report on this form.    Yes, Fill in all of the information below.    Parties   List All Secured Claims   A control of the court with your other schedules. You have nothing elies to report on this form.    Parties   List All Secured Claims   A control of the court with your other schedules. You have nothing elies to report on this form.    Parties   List All Secured Claims   A control of the court with your other schedules. You have nothing elies to report on this form.    Parties   List All Secured Claims   A control of the court with your other schedules. You have nothing elies to report on this form.    Parties   List All Secured Claims   A control of the court with your other schedules. You have nothing elies to report on this form.    Parties   List All Secured Claims   A control of the court with your other schedules. You have nothing elies to report on this form.    Parties   List All Secured Claims   A control of the court with your other schedules. You have nothing elies to report on this form.    College	Fill in this information	on to identify you	r case:			
Describe firings   Describe firings   Describe firings   Missis Name   Last Name						
Debtor 2 only    Plant   March   Mode Name   Last Name						
United States Bankruptcy Court for the:  NORTHERN DISTRICT OF OHIO  Case number   Interest   Intere						
Case number       Check if this is an amended filling						
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space number of Known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes, Fill in all of the information below.    The court of the information below.	United States Bankru	ptcy Court for the:	NORTHERN DISTRICT OF OHIO			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space number of Known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes, Fill in all of the information below.    The court of the information below.						
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, If it out, number the entires, and stack it to this form. On the top of any additional pages, write your name and case number (if known).  1 No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  2 Lust all secured claims, it a creditor has more than one secured daim, list the creditor separately of reach daim. If more than one coder has a particular claim, list the creditor separately of reach daim. If more than one coder has a particular claim, list the creditor separately of reach daim. If more than one coder has a particular claim, list the creditor separately of reach daim. If more than one coder has a particular claim, list the creditor separately of reach daim. If more than one coder has a particular claim, list the creditor separately of reach daim. If more than one coder has a particular claim, list the creditor separately of reach daim. If more than one coder has a particular claim, list the creditor in Part 2. As a control of deduct the value of colational that supports this claim claim.  2 In Chase Bank  3 In Chase Ba					Choole	if this is an
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space number of known).  10 any creditors have claims secured by your property?  11 No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  12 Yes, Fill in all of the information below.  13 Yes, Fill in all of the information below.  14 Yes, Fill in all of the information below.  15 It is all secured claims. If a creditor has a particular claim, list the other creditor separately for each claim. If more than one secured has a particular claim, list the other creditors in Farz 2. As more as possible, the claims in absoluted of evaluation raise.  15 Column 6  16 Value of collateral voltage of collateral vol	(ii kilowii)					
Bose accomplete and accurate as passible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number of known).  1. Do any creditors have claims secured by your property?					amono	ica ming
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. 10 any creditors have claims secured by your property?  1. 10 any creditors have claims secured by your property?  1. 10 any creditors have and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. 10 any creditors have and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. 10 any creditors have and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. 10 any creditors have and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. 10 any creditors have and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 10 any creditors have nothing else to report on this form.  1. 11 any creditors have nothing else to report on this form.  1. 11 any creditors have a nothing else	Official Form 10	06D				
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Creditor's Nume				Do not deduct the		portion
Signature   Sign	2.4 Chasa Bank		Describe the property that secures the claim:			•
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Number, Street, City, State & Zip Code   Unliquidated   Disputed   Nature of lien. Check all that apply.	Wilmington, I	DE 19850	<u></u>			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another of this claim relates to a community debt  Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another of this claim relates to a community debt  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 onloy Debtor 2 only Debtor 1 onloy Debtor 2 only Debtor 2 only Debtor 2 onloy Debtor 2 o	Number, Street, City,	State & Zip Code	_			
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At least one of the debtors and another Check if this claim relates to a community debt    Opened 01/07 Last Active 12/03/15	Debtor 2 only		car loan)			
Check if this claim relates to a community debt  Opened 01/07 Last Active 12/03/15  Last 4 digits of account number 8267   2.2 LGM Co., Inc.  Creditor's Name  Describe the property that secures the claim: \$7,565.00 \$5,289.00 \$2,276.00  2012 Nissan Sentra 110,000 miles  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Number, Street, City, State & Zip Code Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien)	Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
Creditor's Name  2.2 LGM Co., Inc.  Creditor's Name  Describe the property that secures the claim:  2.45 Broadway Avenue Bedford, OH 44146 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Who owes the debt? Check one.  Describe the property that secures the claim:  245 Broadway Avenue Bedford, OH 44146 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Statutory lien (such as tax lien, mechanic's lien)  Debtor 2 lien.  Statutory lien (such as tax lien, mechanic's lien)	At least one of the de	ebtors and another	☐ Judgment lien from a lawsuit			
Opened 01/07 Last Active 12/03/15  Last 4 digits of account number 8267  2.2 LGM Co., Inc.  Creditor's Name  Describe the property that secures the claim: \$7,565.00 \$5,289.00 \$2,276.00  245 Broadway Avenue Bedford, OH 44146 Number, Street, City, State & Zip Code Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien)		relates to a	☐ Other (including a right to offset)			
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245 Broadway Avenue Bedford, OH 44146 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply.  As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		<u>'</u>		Ψ1,303.00	Ψ5,203.00	ΨΣ,Σ10.00
Bedford, OH 44146   Contingent			2012 14100411 0011114 1110,000 1111100			
Bedford, OH 44146   Contingent			As of the date you file the element of the state of			
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Who owes the debt? Check one.  Nature of lien. Check all that apply.  □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien)	Number, Street, City,	State & Zip Code				
■ Debtor 1 only       ■ An agreement you made (such as mortgage or secured car loan)         □ Debtor 2 only       □ Statutory lien (such as tax lien, mechanic's lien)	Who owes the debt?	Check one.	•			
□ Debtor 2 only car loan) □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien)	_		_	secured		
□ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien)			, ,	5554104		
		2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
		-				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

Debtor 1 Clifford E.			Case number (if know)			
First Name Debtor 2 Florida M.	Middle N	ame Last Name				
First Name	Middle N	ame Last Name				
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)				
Date debt was incurred	Opened 5/05/16 Last Active 4/05/17	Last 4 digits of account number 6307	,			
Nationstar Mor	rtgage,	Describe the property that secures the claim:	\$103,397.00	\$110,480.00	\$0.00	
Creditor's Name		536 Narragansett Drive Tallmadge,		<del></del>		
8950 Cypress N Blvd. Coppell, TX 75 Number, Street, City, S	019 tate & Zip Code	OH 44278 Summit County Permanent Parcel No.: 6003438  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mortgage or s	secured			
■ Debtor 2 only □ Debtor 1 and Debtor 2 □ At least one of the deb □ Check if this claim re community debt	tors and another	car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)				
Date debt was incurred Santander Cor						
USA	i Sui i i ci	Describe the property that secures the claim:	\$34,843.00	\$25,014.00	\$9,829.00	
Creditor's Name		2016 Chevrolet Traverse 27,358 miles				
P.O. Box 96124 Ft. Worth, TX 7 Number, Street, City, S	<b>76161</b> tate & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed				
Who owes the debt? Cl	neck one.	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or s	secured			
Debtor 2 only		car loan)  Statutory lien (such as tax lien, mechanic's lien)				
<ul><li>■ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>		☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit				
Check if this claim re community debt		Other (including a right to offset)				
Date debt was incurred	Opened 05/16 Last Active 4/01/17	Last 4 digits of account number 1000	)			
	•	column A on this page. Write that number here:	\$160,426.00			

Write that number here:

\$160,426.00

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property Official Form 106D

page 2 of 3

Debtor 1 Clifford E. Blo		Block		Case number (if know)		
	First Name	Middle Name	Last Name			
Debto	2 Florida M. Wilson					
	First Name	Middle Name	Last Name			
Part 2	List Others to E	Be Notified for a Debt Th	nat You Already Listed			
trying t	to collect from you fo ne creditor for any of	or a debt you owe to some	one else, list the creditor in Pa	ot that you already listed in Part 1. For example, if a collection agency is art 1, and then list the collection agency here. Similarly, if you have more ditions here. If you do not have additional persons to be notified for any		
	Name, Number, Stree Richard J. Syko	et, City, State & Zip Code ra, Esq.		On which line in Part 1 did you enter the creditor?		
	Manley Deas Ko P.O. Box 165028 Columbus, OH 4	ochalski, LLC 3		Last 4 digits of account number		
	<b>Summit County</b>	t, City, State & Zip Code Court of Common Pl	eas	On which line in Part 1 did you enter the creditor? 2.3		
	205 S. High Stre			Last 4 digits of account number		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 3

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Fill	in this information to identify your case:						
De	btor 1 Clifford E. Block						
	<u> </u>	iddle Name Last Nar	ne				
	btor 2 Florida M. Wilson						
(Spo	ouse if, filing) First Name Mi	iddle Name Last Nar	ne				
Un	ited States Bankruptcy Court for the: NORTI	HERN DISTRICT OF OHIO					
	se number				☐ Check	c if this is an	
					_	ded filing	
<b>○</b> t	6 a i a l. Farma 400F/F						
	ficial Form 106E/F	ava Umaaaurad Claim				12/15	
	chedule E/F: Creditors Who Hast complete and accurate as possible. Use Part 1 for						
left. nam Pa	edule D: Creditors Who Have Claims Secured by P Attach the Continuation Page to this page. If you le e and case number (if known).  It 1: List All of Your PRIORITY Unsecured	have no information to report in a P					
1.	Do any creditors have priority unsecured claims a	against you?					
	No. Go to Part 2.						
	Yes.						
2.	List all of your priority unsecured claims. If a credidentify what type of claim it is. If a claim has both pripossible, list the claims in alphabetical order according Part 1. If more than one creditor holds a particular claims.	ority and nonpriority amounts, list that ng to the creditor's name. If you have to	claim here ar	nd show both priority a	ind nonpriority amou	nts. As much as	S
	(For an explanation of each type of claim, see the ins	structions for this form in the instruction	n booklet.)	Total claim	Priority	Nonpriority	
2.1	Regional Income Tax Agency	Last 4 digits of account numbe	r 6503	\$300.00	amount \$300.00	amount	\$0.00
	Priority Creditor's Name	Last 4 digits of account number	0303	Ψ300.00	Ψ300.00	<u>'</u>	ψ0.00
	P.O. Box 477900	When was the debt incurred?	2014 - 2	016	-		
	Broadview Heights, OH 44147  Number Street City State Zlp Code	As of the date you file, the clain	n is: Check a	Il that apply			
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured of	laim:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	_	■ Taxes and certain other debts	vou owo tho	government			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Claims for death or personal in	•	•			
	No	☐ Other. Specify	, any mino ye	a word intomodica			
	☐ Yes	Income Ta	axes			-	
	rt 2: List All of Your NONPRIORITY Unsec						
3.	Do any creditors have nonpriority unsecured clai	• .					
	No. You have nothing to report in this part. Submi	it this form to the court with your other	schedules.				
	■ Yes.						
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each than one creditor holds a particular claim, list the other part 2	claim. For each claim listed, identify w	what type of cl	aim it is. Do not list cla	aims already included	d in Part 1. If mo	

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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33052

Debtor 1 Debtor 2	Clifford E. Block Florida M. Wilson		Case number (if know)		
I	Advance America Nonpriority Creditor's Name	Last 4 digits of account number	4170	\$900.00	
	584 South Avenue Tallmadge, OH 44278	When was the debt incurred?	5/2017		
_	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
debt	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Loan			
	Alpha Recovery Corp.	Last 4 digits of account number	0003	\$2,726.82	
	Nonpriority Creditor's Name 5660 Greenwood Plaza Blvd. Suite 101	When was the debt incurred?	Opened 02/17		
	Greenwood Village, CO 80111	_			
	Number Street City State Zlp Code	As of the date you file, the claim			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	a plane, and other similar debts		
		, ,			
	Yes	Other. Specify Collections	for DentalFirst Financing		
	Capital One Bank USA, N.A. Nonpriority Creditor's Name	Last 4 digits of account number	2405	\$2,066.00	
	15000 Capital One Drive Richmond, VA 23238	When was the debt incurred?	Opened 03/96 Last Active 7/05/16		
_	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify Credit Card	<u> </u>		

Schedule E/F: Creditors Who Have Unsecured Claims

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	r 2 Florida M. Wilson		Case number (if know)				
.4	Centralized Business Solutions, Inc	Last 4 digits of account number	7198	\$217.00			
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 2818	When was the debt incurred?	Opened 06/14	_			
	Canton, OH 44720  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Collections	for Summit Pain Specialists				
5	Crystal Clinic Orthopaedic	Last 4 digits of account number	8981	\$1,288.00			
	Nonpriority Creditor's Name 444 N. Main Street	When was the debt incurred?	11/3/2016				
	Akron, OH 44310-3110  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Medical Se	rvices				
6	Crystal Clinic Orthopaedic  Nonpriority Creditor's Name	Last 4 digits of account number	8492	\$29.63			
	444 North Main Street Akron. OH 44310-3110	When was the debt incurred?	10/17/2016				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Medical Se	■ Other. Specify Medical Services				

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor Debtor	1 Clifford E. Block 2 Florida M. Wilson		Case number (if know)			
4.7	Crystal Clinic, Inc.	Last 4 digits of account number	8506	\$290.69		
	Nonpriority Creditor's Name P.O. Box 75575 Cleveland, OH 44101-4755	When was the debt incurred?	2016			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
d	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Medical Se	rvices			
4.8	Diversified Consultants Nonpriority Creditor's Name	Last 4 digits of account number	0999	\$71.00		
	P.O. Box 551268  Jacksonville, FL 32255	When was the debt incurred?	Opened 01/17			
=	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Collections	for AT&T			
4.9	Edwin Shaw Hospital	Last 4 digits of account number	2002	\$205.00		
	Nonpriority Creditor's Name Dept. 781113 P.O. Box 78000	When was the debt incurred?	9/2016			
	Detroit, MI 48278-1113  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	and an and attention in the Co.			
	■ No	Debts to pension or profit-sharin				
	□Yes	■ Other. Specify Medical Se	rvices			

Schedule E/F: Creditors Who Have Unsecured Claims

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Fidelity Properties, Inc.	Last 4 digits of account number	3779	\$289.00
Nonpriority Creditor's Name 220 E. Main Street Alliance, OH 44601	When was the debt incurred?	Opened 01/14	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	■ Other. Specify Collections Services	for Radiology And Imaging	
Fidelity Properties, Inc.	Last 4 digits of account number	3200	\$182.00
Nonpriority Creditor's Name 220 E. Main Street Alliance, OH 44601	When was the debt incurred?	Opened 01/14	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Services	for Radiology And Imaging	
Finance System of Toledo	Last 4 digits of account number	0762	\$327.75
P.O. Box 351297 Toledo, OH 43635-1297	When was the debt incurred?	2017	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Collections	for Pathology Laboratories	

Schedule E/F: Creditors Who Have Unsecured Claims

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1 Clifford E. Block 2 Florida M. Wilson		Case number (if know)	
First Federal Credit & Collections	Last 4 digits of account number	7681	\$351.0
Nonpriority Creditor's Name 24700 Chagrin Blvd., Suite 205 Cleveland, OH 44122	When was the debt incurred?	Opened 07/14	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	mation agreement of divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Summa	for Emergency Associates -	
First Federal Credit & Collections	Last 4 digits of account number	6223	\$120.0
Nonpriority Creditor's Name 24700 Chagrin Blvd., Suite 205	When was the debt incurred?	Opened 04/14	
Cleveland, OH 44122 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify	for Ohio Pulmonary NPCS -	
First Federal Credit & Collections	Last 4 digits of account number	9739	\$105.0
Nonpriority Creditor's Name 24700 Chagrin Blvd., Suite 205 Cleveland, OH 44122	When was the debt incurred?	Opened 03/13	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other Specify Collections	for Drs. Marquinez Mubashir	

Schedule E/F: Creditors Who Have Unsecured Claims

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Florida M. Wilson		Case number (if know)	
GC Services Limited Partnership	Last 4 digits of account number	1080	\$191. <sup>-</sup>
Nonpriority Creditor's Name  P.O. Box 930824  Wiscom MI 48202 0824	When was the debt incurred?	Opened 02/05 Last Active 5/11/15	
Wixom, MI 48393-0824  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collections	s for Macy's	
IC Systems, Inc.	Last 4 digits of account number	9001	\$243.
Nonpriority Creditor's Name 444 Highway 96 East	When was the debt incurred?	Opened 07/15	• •
St. Paul, MN 55127  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	to of the date you me, the claim.	o. Oncok all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collections	s for AT&T Midwest	
IC Systems, Inc.	Last 4 digits of account number	5001	\$87.
Nonpriority Creditor's Name 444 Highway 96 East	When was the debt incurred?	Opened 09/15	
St. Paul, MN 55127 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alatan	
At least one of the debtors and another	Type of NONPRIORITY unsecured	o ciaim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
debt		and the distriction of the distr	
	report as priority claims  Debts to pension or profit-sharin	,	

Schedule E/F: Creditors Who Have Unsecured Claims

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Florida M. Wilson			
Midland Credit Management, Inc.	Last 4 digits of account number	4896	\$1,426.4
Nonpriority Creditor's Name 2365 Northside Drive, Suite 300	When was the debt incurred?	2015	
San Diego, CA 92108  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• ,		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Collections	s for Synchrony Bank/HH Gregg	
Navient	Last 4 digits of account number	1451	\$3,731.0
Nonpriority Creditor's Name			
Attn: Claims Dept.		Opened 08/06 Last Active	
P.O. Box 9500 Wilkes-Barre, PA 18773	When was the debt incurred?	4/20/17	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al Loan	
Northland Group, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	4630	\$491.7
P.O. Box 390905 Minneapolis, MN 55439	When was the debt incurred?	Opened 08/14 Last Active 1/05/16	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharir		
□Yes	Other. Specify Collections	s for Macy's	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Schedule E/F: Creditors Who Have Unsecured Claims

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<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1	Clifford E. Block
Debtor 2	Florida M. Wilson

Case number (if know)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 300.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 300.00
				Total Claim
	6f.	Student loans	6f.	\$ 3,731.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 11,608.22
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 15,339.22

Fill in this infor	mation to identify your	case:			
Debtor 1	Clifford E. Block				
	First Name	Middle Name	Last Name		
Debtor 2	Florida M. Wilson	1			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number _					
(if known)				_	heck if this is an mended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	Ony		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	<u> </u>		<u> </u>		
	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5	City		Olalo	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

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Fill in thi	s information to identify you	case:			
Debtor 1	Clifford E. Block				
<b>5</b> 1 / 6	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	Florida M. Wilso First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO		
Case nun	nber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	lebtors			12/15
people ar fill it out,	e filing together, both are eq	ually responsible for sup boxes on the left. Attac	oplying correct information the Additional Page to	on. If more space is n	ate as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write
1. Do	you have any codebtors? (I	you are filing a joint case	, do not list either spouse	as a codebtor.	
■ No					
Arizo	ithin the last 8 years, have yo ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spo	a, Nevada, New Mexico, F	uerto Rico, Texas, Washir		states and territories include
in lin Form	e 2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make s	ure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt sthat apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ine
	Number Street City	State	ZIP Code	-	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	ine
	Number Street City	State	ZIP Code	-	

Schedule H: Your Codebtors

Fill	in this information to identify your	case.				1			
	otor 1 Clifford E.								
	potor 2 Florida M. V	Wilson							
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF OHIO						
	se number nown)		-			Check if this is:  An amende  A supplement 13 income a	d filing ent showii	ng postpetition following date:	chapter
0	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form  11: Describe Employment	ur spouse is not filing w . On the top of any additi	ith you, do not inclu	de infor	mati	on about your spo	use. If m	ore space is	needed,
	information.		Debtor 1					iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			☐ Emplo	•		
	employers.	Occupation	Janitorial			Retired			
	Include part-time, seasonal, or self-employed work.	Employer's name	Self Employed						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mo	onthly Income							
spou	mate monthly income as of the cuse unless you are separated.	·	,		·		·	·	Ü
	e space, attach a separate sheet to					.,			,
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$	0.00	\$	0.00	

Case number (if known)

				For	Debtor 1		or Debtor on-filing s		
	Copy	line 4 here	4.	\$	0.00	\$	on-ming s	0.00	<u> </u>
		/ line 4 nere	••	*-	0.00	Ψ		0.00	<u>_</u>
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$		0.00	)
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	<u> </u>	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		0.00	_
	5e.	Insurance	5e.	\$	0.00	\$		0.00	
	5f.	Domestic support obligations	5f.	<u> </u>	0.00	\$		0.00	_
	5g.	Union dues	5g.	\$	0.00	\$		0.00	_
	5h.	Other deductions. Specify:	5h.+	\$	0.00	⊦\$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.	\$	0.00	\$		0.00	_
7.	Calcı	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$		0.00	_
8.									
Ο.	8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•					
		monthly net income.	8a.	\$	3,000.00	\$		0.00	_
	8b.	Interest and dividends	8b.	\$	0.00	\$		0.00	<u></u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		0.00	1
	8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	_
	8e.	Social Security	8e.	\$	1,286.80	\$		921.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$		0.00	-
	8g.	Pension or retirement income	_ 8g.	\$	0.00	\$		0.00	<del>-</del>
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$		0.00	<del>_</del>
									_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,286.80	\$		921.0	0
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	•	4,286.80 + \$_		921.00	= \$_	5,207.80
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depend				n <i>Schedule</i>	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines						\$	5,207.80
								Combi	ned ly income
13.	Do y	ou expect an increase or decrease within the year after you file this form	?						.,
		No.							
		Yes. Explain:							

	in this informa	ation to identify yo	our case.			ſ				
		stion to identify yo	Jui Case.							
Debt	tor 1	Clifford E. B	lock			Ch	eck if th			
Debt	tor 2	Flanista 84 384						nended filing	ing postpotition abouter	
	ouse, if filing)	Florida M. W	iison						ving postpetition chapter the following date:	
(Opc	, acc, ii iiiiig)								<b>9</b>	
Unite	ed States Bankı	ruptcy Court for the	: NORTH	ERN DISTRICT OF OHIO			MM /	DD / YYYY		
Case	e number									
(If kr	nown)									
Of	ficial Fo	orm 106J								
Sc	chedule	J: Your l	Expen	ses					12/1	15
Be a info nun	as complete ormation. If m nber (if know	and accurate as nore space is ne n). Answer ever	possible. eded, atta ry question	If two married people are chanother sheet to this f						_
Part	Is this a joir	ribe Your House	hold							_
١.	□ No. Go to									
				eta bassabaldO						
		es Debtor 2 live i	ın a separa	ate nousenoid?						
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.			
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		De aç	ependent's je	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
									□ res □ No	
									☐ Yes	
3.	expenses o	penses include of people other the d your depende	han $_{oldsymbol{\square}}$	No Yes						
exp	imate your ex	a date after the b	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a s	supplen the box	nent in a Cha at the top of	pter 13 case to report f the form and fill in the	
the		h assistance and		government assistance if luded it on <i>Schedule I:</i> Y				Your expe	enses	
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$		0.00	
	If not include	ded in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		erty, homeowner's	s, or renter	's insurance		4b.			0.00	
		maintenance, re				4c.	\$		100.00	
_		eowner's associat				4d.	· <u> </u>		0.00	
5.	Additional i	mortgage payme	ents for yo	our residence, such as hor	me equity loans	5.	\$		0.00	

btor 2 Florida	E. Block M. Wilson	Case num	ber (if known)	
Utilities:				
	y, heat, natural gas	6a.	\$	400.00
	ewer, garbage collection	6b.	\$	150.00
	ne, cell phone, Internet, satellite, and cable services	6c.		350.00
6d. Other. Sp		6d.	·	0.00
	sekeeping supplies	7.		850.00
	children's education costs	8.	\$	0.00
Clothing, laun	dry, and dry cleaning	9.	\$	125.00
•	products and services	10.	\$	85.00
Medical and d	•	11.		200.00
	Include gas, maintenance, bus or train fare.		·	
Do not include	• •	12.	\$	375.00
	, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
Charitable cor	tributions and religious donations	14.	\$	0.00
Insurance.				
	insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insu		15a.		100.00
15b. Health in		15b.		0.00
15c. Vehicle in		15c.		222.00
	surance. Specify:	15d.	\$	0.00
	nclude taxes deducted from your pay or included in lines 4 or 2		•	
Specify:		16.	\$	0.00
Installment or	lease payments:	47-	<b>c</b>	2.24
	nents for Vehicle 1	17a.	· <u> </u>	0.00
	nents for Vehicle 2	17b.		0.00
17c. Other. Sp		17c.		0.00
17d. Other. Sp	·	17d.	\$	0.00
	s of alimony, maintenance, and support that you did not rep		\$	0.00
Other navmen	nyour pay on line 5, Schedule I, Your Income (Official Form ts you make to support others who do not live with you.	1061).	\$	0.00
Specify:	is you make to support others who do not live with you.	19.	Ψ	0.00
· · ·	perty expenses not included in lines 4 or 5 of this form or o		our Income	
	es on other property	20a.		0.00
20b. Real esta		20b.		0.00
	homeowner's, or renter's insurance	20c.		0.00
	ance, repair, and upkeep expenses	20d.		0.00
	ner's association or condominium dues	20e.	· ·	0.00
Other: Specify:			+\$	0.00
Other. Specify.			-Ψ	0.00
Calculate your	monthly expenses			
22a. Add lines	4 through 21.		\$	3,057.00
22b. Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	
22c. Add line 2	2a and 22b. The result is your monthly expenses.		\$	3,057.00
	, , ,			
	monthly net income.			
	e 12 (your combined monthly income) from Schedule I.	23a.	· <u> </u>	5,207.80
23b. Copy you	ur monthly expenses from line 22c above.	23b.	-\$	3,057.00
	your monthly expenses from your monthly income.	220	\$	2,150.80
The resu	It is your monthly net income.	23c.	Ψ	۷,۱۵۵.۵۱
For example, do modification to the	an increase or decrease in your expenses within the year a you expect to finish paying for your car loan within the year or do you expe e terms of your mortgage?			ease or decrease because
■ No.				

Fill in this infor	mation to identify your	casa:			
Debtor 1	Clifford E. Block First Name		ast Name		
Dobtor 2			Lasi Name		
Debtor 2 (Spouse if, filing)	Florida M. Wilson		ast Name		
(Spouse II, IIIIIIg)	First Name	widdle Name	Lasi Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF OHIO	)		
Case number					
(if known)					☐ Check if this is an amended filing
You must file thi	is form whenever you fi	er, both are equally responsible for ile bankruptcy schedules or amen n connection with a bankruptcy c 1519, and 3571.	ded sc	nedules. Making a false stat	
Sig	n Below				
Did you pa	ly or agree to pay some	eone who is NOT an attorney to he	elp you	fill out bankruptcy forms?	
■ No					
☐ Yes. I	Name of person				akruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the summary and	l sched	ules filed with this declarati	on and
X /s/ Clif	ford E. Block		X /s/ I	Florida M. Wilson	
	d E. Block			rida M. Wilson	
Signatu	re of Debtor 1		Sign	ature of Debtor 2	
Date	August 2, 2017		Date	August 2, 2017	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Fill in	this inforn	nation to identify you	r case:			
Debte	or 1	Clifford E. Block				
Debto	or 2	First Name Florida M. Wilso	Middle Name	Last Name		
	e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (	OF OHIO		
Case (if know	number _				-	Check if this is an mended filing
Star Be as inform	tement complete a	and accurate as possi	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part	Give C	Details About Your Ma	urital Status and Where You	Lived Before		
1. V	Vhat is you	r current marital statu	ıs?			
	■ Married □ Not mai					
2. [	Ouring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	<i>i</i> .	
	Debtor 1 Pr	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
[	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part :	2 Explai	in the Sources of You	r Income			
F	fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
[	□ No ■ Yes. Fil	l in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$56,354.76	☐ Wages, commissions, bonuses, tips	\$0.00
			Operating a husiness		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco	oply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)		☐ Wages, commissions, bonuses, tips	\$53,805.00	☐ Wages, components with the Wages, tips	nissions,	\$0.00
		Operating a business		☐ Operating a b	ousiness	
For the calendar year (January 1 to Decemb		☐ Wages, commissions, bonuses, tips	\$83,548.00	☐ Wages, commonute bonuses, tips	nissions,	\$0.00
		Operating a business		☐ Operating a b	ousiness	
Include income regard other public be winnings. If you ar	gardless of whethenefit payments; e filing a joint case and the gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a rest; dividends; money collec you received together, list it o	ted from lawsuits; inly once under De	oyalties; and g btor 1.	
		Debtor 1		Debtor 2		
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
From January 1 of cuthe date you filed for		Social Security	\$9,007.60	Social Securi	ty	\$6,447.00
For last calendar yea (January 1 to December		Social Security	\$17,015.20	Social Securi	ty	\$12,310.80
For the calendar year (January 1 to December		Social Security	\$17,015.20	Social Securi	ty	\$12,310.80
6. Are either Debtor  No. Neither individual During  No. Neither individual Ne	1's or Debtor 2 r Debtor 1 nor E ual primarily for a the 90 days befor D. Go to line 7 es List below e paid that or not include ect to adjustmen r 1 or Debtor 2 or the 90 days befor D. Go to line 7 es List below e include pay attorney for	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 years or both have primarily consultance you filed for bankruptcy, distributed each creditor to whom you pai ments for domestic support of this bankruptcy case.	r debts?  Immer debts. Consumer debts. Id purpose."  d you pay any creditor a tota id a total of \$6,425* or more into the for domestic support oblighis bankruptcy case. Is after that for cases filed on timer debts. Immer debts. In you pay any creditor a total of \$600 or more and bligations, such as child support.	I of \$6,425* or more none or more pays ations, such as chieved or after the date of I of \$600 or more?  If the total amount your and alimony. A	e? ments and the ld support and adjustment.  rou paid that cr	total amount you I alimony. Also, do reditor. Do not lude payments to an
Creditor's Name	and Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this pay	yment for

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Clifford E. Block Florida M. Wilson		Cas	e number (if knowr	D)	
7.	Inside of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relatives of any gen- control, or owner of 20% of	eral partners; partner r more of their voting	erships of which y g securities; and	ou are a genera any managing a	al partner; corporations gent, including one fo
	_	No					
		Yes. List all payments to an insider.					
	Insic	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	inside Includ	n 1 year before you filed for bankruptoer? le payments on debts guaranteed or cos		ments or transfer a	ny property on	account of a de	ebt that benefited an
	_	Yes. List all payments to an insider					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
Par	t 4:	Identify Legal Actions, Repossession	s. and Foreclosures	para		morado orda	mor o riamo
					d dll		
ð.	List al	n 1 year before you filed for bankrupted Il such matters, including personal injury ications, and contract disputes.					
	_	No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
	Flor Wils	onstar Mortgage, LLC vs. ida Wilson, aka Florida M. on, et al. 017031100	Foreclosure	Summit County Common Pleas 209 S. High Str Akron, OH 443	eet	☐ Pending ☐ On appe ☐ Conclud	al
						Judgment	for Plaintiff
10.	Check	n 1 year before you filed for bankrupto k all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	v.	erty repossessed, f			
	Cred	litor Name and Address	Describe the Property		Date	9	Value of the property
			Explain what happened	I			r dra 9
11.	acco	n 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.		uding a bank or fir	nancial institutio	n, set off any a	nmounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date	e action was	Amount
12.	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		erty in the possess			efit of creditors, a
	_	vo Yes					
	_						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Clifford E. Block Florida M. Wilson			Case number (	if known)	
Par	t 5:	List Certain Gifts and Contribution	s				
13.	<b>I</b> N	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	uptcy, d	id you give any gifts with a total va	alue of more th	an \$600 per person	?
	Gifts per p	with a total value of more than \$60 person on to Whom You Gave the Gift and	0	Describe the gifts		Dates you gave the gifts	Value
14.	Within	n 2 years before you filed for bankr No Yes. Fill in the details for each gift or c			ons with a total	value of more than	\$600 to any charity?
	more Char	s or contributions to charities that to the than \$600 city's Name ress (Number, Street, City, State and ZIP Code		Describe what you contributed		Dates you contributed	Value
Par	t 6:	List Certain Losses					
15.	or gar	n 1 year before you filed for bankru mbling? No Yes. Fill in the details. cribe the property you lost and		since you filed for bankruptcy, did		ning because of the	it, fire, other disaster,
		the loss occurred	Include	the amount that insurance has paid. ce claims on line 33 of <i>Schedule A/B</i>	List pending	loss	lost
Par	t 7:	List Certain Payments or Transfers	<b>S</b>				
16.	Includ	n 1 year before you filed for bankru ulted about seeking bankruptcy or ple any attorneys, bankruptcy petition p No Yes. Fill in the details.	preparin	g a bankruptcy petition?			rty to anyone you
	Addr Emai	on Who Was Paid ress il or website address on Who Made the Payment, if Not Y	ou"	Description and value of any propertions of transferred	perty	Date payment or transfer was made	Amount of payment
	Amo 3200	ourgis & Associates O W. Market Street, Suite 106 on, OH 44333					\$1,000.00
17.	promi Do no	n 1 year before you filed for bankru ised to help you deal with your cred tinclude any payment or transfer that	ditors or	to make payments to your credito		r transfer any prope	rty to anyone who
		Yes. Fill in the details. on Who Was Paid ress		Description and value of any protransferred	perty	Date payment or transfer was made	Amount of payment

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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18.	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No							,		
		Yes. Fill in the details.  rson Who Received Transfer		Description and				ny property or		ate transfer was
		dress rson's relationship to you		property transfer	rrea		payments repaid in excl	eceived or debts nange	n	nade
<ul> <li>Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of whice beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> </ul>							which you are a			
		Yes. Fill in the details.								
	Na	me of trust		Description and	value of the pro	operty	transferre	d		ate Transfer was nade
Par	t 8:	List of Certain Financial Accounts, In	strur	ments, Safe Depos	it Boxes, and S	itorage	Units			
20.		hin 1 year before you filed for bankruptod, moved, or transferred?	cy, w	ere any financial a	ccounts or inst	rumer	its held in y	our name, or for y	our	benefit, closed,
	Incl	lude checking, savings, money market, uses, pension funds, cooperatives, asso					eposit; sha	res in banks, credi	t ur	nions, brokerage
		No								
		Yes. Fill in the details.								
		me of Financial Institution and Idress (Number, Street, City, State and ZIP de)		st 4 digits of count number	Type of acco	ount o	clos mov	e account was ed, sold, ed, or sferred		Last balance before closing or transfer
21.		you now have, or did you have within 1 h, or other valuables?	year	before you filed fo	or bankruptcy, a	any sa	fe deposit I	oox or other depos	itor	y for securities,
		No Yes. Fill in the details.								
		me of Financial Institution Idress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Des	cribe the co	ontents		Do you still have it?
22.	Hav	ve you stored property in a storage unit	or pla	ace other than you	ır home within	1 year	before you	filed for bankrupt	су?	
		No Yes. Fill in the details.								
		me of Storage Facility Idress (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Des	cribe the co	ontents		Do you still have it?
Par	t 9:	Identify Property You Hold or Control	l for S	Someone Else						
23.	3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						or hold in trust			
		No Yes. Fill in the details.								
	_	vner's Name		Where is the pro (Number, Street, City,		Des	cribe the p	roperty		Value
		dress (Number, Street, City, State and ZIP Code)		Code)						
		<ul> <li>Give Details About Environmental Information</li> <li>purpose of Part 10, the following definition</li> </ul>								
-01	Ī	•								
	Env	<i>rironmental law</i> means any federal, state	e, or	iocal statute or reg	julation concer	ning p	ollution, co	ontamination, relea	ses	of hazardous or

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Clifford E. Block Debtor 1 Debtor 2 Florida M. Wilson

Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Rep	ort all notices, releases, and proceedings th	at you know about, regardless of when	they occurred.						
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adr	ninistrative proceeding under any envir	onmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t11: Give Details About Your Business or	Connections to Any Business							
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following connections to any	y business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	■ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing ex	ecutive of a corporation							
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation							
	☐ No. None of the above applies. Go to F	Part 12.							
	Yes. Check all that apply above and fill	in the details below for each business.							
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.						
	(Number, Street, City, State and 21r Code)	Name of accountant or bookkeeper	Dates business existed						
	CFD Enterprise of Ohio, LLC 536 Narrangansett Drive	Janitorial	EIN: 46-435876						
	Tallmadge, OH 44278		From-To 2014 - Present						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Debtor 2 Clifford E. Block Florida M. Wilson	Case number (if known)
28. Within 2 years before you fi institutions, creditors, or ot	I for bankruptcy, did you give a financial statement to anyone about your business? Include all financia r parties.
■ No □ Yes. Fill in the details b	ow.
Name Address (Number, Street, City, State and ZIP	Date Issued
Part 12: Sign Below	
are true and correct. I understan	ntement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answe hat making a false statement, concealing property, or obtaining money or property by fraud in connect
re true and correct. I understan vith a bankruptcy case can resu 8 U.S.C. §§ 152, 1341, 1519, and	hat making a false statement, concealing property, or obtaining money or property by fraud in connect n fines up to \$250,000, or imprisonment for up to 20 years, or both.
re true and correct. I understan vith a bankruptcy case can resu 8 U.S.C. §§ 152, 1341, 1519, and /s/ Clifford E. Block	hat making a false statement, concealing property, or obtaining money or property by fraud in connect n fines up to \$250,000, or imprisonment for up to 20 years, or both. 571.
are true and correct. I understan vith a bankruptcy case can resu 8 U.S.C. §§ 152, 1341, 1519, and /s/ Clifford E. Block Clifford E. Block	hat making a false statement, concealing property, or obtaining money or property by fraud in connect in fines up to \$250,000, or imprisonment for up to 20 years, or both.  571.  /s/ Florida M. Wilson
are true and correct. I understan with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, and /s/ Clifford E. Block Clifford E. Block Signature of Debtor 1	hat making a false statement, concealing property, or obtaining money or property by fraud in connect in fines up to \$250,000, or imprisonment for up to 20 years, or both.
are true and correct. I understan vith a bankruptcy case can resu 8 U.S.C. §§ 152, 1341, 1519, and /s/ Clifford E. Block Clifford E. Block Signature of Debtor 1 Date August 2, 2017	hat making a false statement, concealing property, or obtaining money or property by fraud in connect in fines up to \$250,000, or imprisonment for up to 20 years, or both.    Solution
re true and correct. I understan vith a bankruptcy case can resu 8 U.S.C. §§ 152, 1341, 1519, and /s/ Clifford E. Block Clifford E. Block Signature of Debtor 1  Date August 2, 2017 Did you attach additional pages	hat making a false statement, concealing property, or obtaining money or property by fraud in connect in fines up to \$250,000, or imprisonment for up to 20 years, or both.    Solution   Solution   Signature of Debtor 2
are true and correct. I understan with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, and /s/ Clifford E. Block Clifford E. Block Signature of Debtor 1  Date August 2, 2017	hat making a false statement, concealing property, or obtaining money or property by fraud in connect in fines up to \$250,000, or imprisonment for up to 20 years, or both.    Solution   Solution   Signature of Debtor 2
are true and correct. I understan with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, and Is U.S.C. §§ 154, 1549, and Is U.S.C. §§ 154, 1549, and Is U.S.C. §§ 154, 1549, and Is U.S.C. §§ 154, and Is U.S.C.	hat making a false statement, concealing property, or obtaining money or property by fraud in connect in fines up to \$250,000, or imprisonment for up to 20 years, or both.    Solution   Solution   Signature of Debtor 2

Fill in this information to identify your case:							
Debtor 1	Clifford E. Block						
Debtor 2 Florida M. Wilson							
United States B	ankruptcy Court for the:	Northern District of Ohio					
Case number(if known)							

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
•	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

### Official Form 122C-1

# Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 8,059.13 Gross receipts (before all deductions) 5,113.94 Ordinary and necessary operating expenses Copy Net monthly income from a business. 2,945.18 0.00 \$ 2,945.18 here -> \$ profession, or farm 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

			Column A Debtor 1		Column B Debtor 2	or	
7.	Interest, dividends, and royalties		\$	0.00	\$	0.00	
8.	Unemployment compensation		\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a ben the Social Security Act. Instead, list it here:	efit unde	r				
		0.00					
	For your spouse \$	0.00					
9.	<b>Pension or retirement income.</b> Do not include any amount received that we benefit under the Social Security Act.	as a	\$	0.00	\$	0.00	
10.	<b>Income from all other sources not listed above.</b> Specify the source and a Do not include any benefits received under the Social Security Act or paymer received as a victim of a war crime, a crime against humanity, or internation domestic terrorism. If necessary, list other sources on a separate page and total below.	ents al or					
			\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
11.	<b>Calculate your total average monthly income.</b> Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	2,945.18	+ _	0.00	= \$	2,945.18
							al average nthly income
Part	2: Determine How to Measure Your Deductions from Income						
12.	Copy your total average monthly income from line 11.					\$	2,945.18
13.	Calculate the marital adjustment. Check one:					-	
	☐ You are not married. Fill in 0 below.						
	■ You are married and your spouse is filing with you. Fill in 0 below.						
	☐ You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was North dependents, such as payment of the spouse's tax liability or the spouse						
	Below, specify the basis for excluding this income and the amount of ir adjustments on a separate page.	icome de	voted to each	h purpose	. If necessary	/, list additi	onal
	If this adjustment does not apply, enter 0 below.						
		_ \$_					
		_					
		_					
	Total	\$	0.0	00co	py here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	2,945.18
15.	Calculate your current monthly income for the year. Follow these step	s:					
	15a. Copy line 14 here=>					\$	2,945.18
	Multiply line 15a by 12 (the number of months in a year).					x 1	2
	15b. The result is your current monthly income for the year for this part of	the form				\$	35,342.16

Debtor 1	Clifford E.	<b>Block</b>
Debtor 2	Florida M.	Wilson

|--|

	Calculat	te the median family income that applies to yo	u. Follow these steps:		
	16a. Fill	in the state in which you live.	ОН		
	16b. Fill	in the number of people in your household.	2		
	16c. Fill	in the median family income for your state and size	ze of household.		<sub>\$</sub> 57,938.00
		find a list of applicable median income amounts,		he separate	<u> </u>
17		tructions for this form. This list may also be availa the lines compare?	ble at the bankruptcy clerk's office.		
17		_	the ten of new Activity tensor should	Lhand Dianasahla inaansa	
	17a.	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO			
	17b. [	☐ Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 about 14 about 15 about 16 about 16 about 16 about 16 about 17 about 18 ab	ition of Your Disposable Income (		
Par	3: C	calculate Your Commitment Period Under 11 U	S.C. § 1325(b)(4)		
18.	Сору ус	our total average monthly income from line 11		\$	2,945.18
19.	contend spouse's	the marital adjustment if it applies. If you are methat calculating the commitment period under 11 s income, copy the amount from line 13.	U.S.C. § 1325(b)(4) allows you to de	educt part of your	
	19a. If th	ne marital adjustment does not apply, fill in 0 on lin	ne 19a.	-\$	0.00
	19b. <b>Sul</b>	btract line 19a from line 18.			\$\$
20.	Calculat	te your current monthly income for the year. F	Follow these steps:		
	20a. Cop	py line 19b			\$2,945.18
		Itiply by 12 (the number of months in a year).			<b>x</b> 12
	20b. The	e result is your current monthly income for the year	r for this part of the form		\$35,342.16
	20c. Cop	py the median family income for your state and si	ze of household from line 16c		\$57,938.00
	21. <b>Ho</b>	w do the lines compare?			
	-	Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by the court, on the top of	page 1 of this form, check bo	ox 3, The commitment
		Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ss otherwise ordered by the court, o	n the top of page 1 of this fo	rm, check box 4, The
ar	4: S	ign Below			
	By signir	ng here, under penalty of perjury I declare that the	e information on this statement and i	n any attachments is true an	id correct.
>	/s/Clif	fford E. Block	X /s/ Florida M. \	Wilson	
•	Cliffor	rd E. Block	Florida M. Wil	son	
	Signatu	ure of Debtor 1	Signature of Deb	tor 2	
		ugust 2, 2017	Date August :		
		M / DD / YYYY	MM / DD /		

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 3

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btor 1	Clifford	E.	<b>Block</b>
btor 2	Florida	М.	Wilson

Case number (if known)
------------------------

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 02/01/2017 to 07/31/2017.

#### Line 5 - Income from operation of a business, profession, or farm

Source of Income: CFD Enterprise of Ohio, LLC

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	02/2017	\$7,117.05	\$4,838.70	\$2,278.35
5 Months Ago:	03/2017	\$8,139.00	\$4,785.91	\$3,353.09
4 Months Ago:	04/2017	\$7,743.71	\$4,796.50	\$2,947.21
3 Months Ago:	05/2017	\$7,601.00	\$5,797.14	\$1,803.86
2 Months Ago:	06/2017	\$9,831.00	\$5,629.64	\$4,201.36
Last Month:	07/2017	\$7,923.00	\$4,835.77	\$3,087.23
_	Average per month:	\$8,059.13	\$5,113.94	
			Average Monthly NET Income:	\$2.945.18

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## United States Bankruptcy Court Northern District of Ohio

In re	Clifford E. Block Florida M. Wilson		Case No.	
111.10	FIOTICA IVI. VVIISOTI	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	EBTOR(S)
C	ursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation	o(b), I certify that I am the attorneing of the petition in bankruptcy, of	y for the above nam or agreed to be paid	ned debtor(s) and that to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received		\$	1,000.00
	Balance Due		\$	3,000.00
2. \$	<b>310.00</b> of the filing fee has been paid.			
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. <b>I</b>	I have not agreed to share the above-disclosed comp	pensation with any other person u	nless they are mem	bers and associates of my law firm.
[	I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
6. I	n return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy of	ase, including:
b c.	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credit [Other provisions as needed]  See Rights and Responsibilities	tement of affairs and plan which r	nay be required;	
7. B	y agreement with the debtor(s), the above-disclosed fe See Rights and Responsibilities	e does not include the following s	service:	
		CERTIFICATION		
	certify that the foregoing is a complete statement of an nkruptcy proceeding.	y agreement or arrangement for p	payment to me for re	epresentation of the debtor(s) in
Au Da	igust 2, 2017  tte	/s/ Jamie M. Nagle Jamie M. Nagle 00 Signature of Attorney Amourgis & Assoc 3200 W. Market Str Akron, OH 44333 330-535-6650 Fax bk_department@a Name of law firm	75205 ciates reet, Suite 106 : 330-535-2205	

## United States Bankruptcy Court Northern District of Ohio

In re	Clifford E. Block Florida M. Wilson		Case No.	
		Debtor(s)	Chapter	13
	VED	JEIGATION OF CREDITOR		
	VER	IFICATION OF CREDITOR	MATRIX	
E1 1				
The abo	ove-named Debtors hereby verify	that the attached list of creditors is true and co	orrect to the best	of their knowledge.
Date:	August 2, 2017	/s/ Clifford E. Block		
		Clifford E. Block		
		Signature of Debtor		
Date:	August 2, 2017	/s/ Florida M. Wilson		
		Florida M. Wilson		

Signature of Debtor

Advance America 584 South Avenue Tallmadge, OH 44278

Alpha Recovery Corp. 5660 Greenwood Plaza Blvd. Suite 101 Greenwood Village, CO 80111

Capital One Bank USA, N.A. 15000 Capital One Drive Richmond, VA 23238

Centralized Business Solutions, Inc Attn: Bankruptcy P.O. Box 2818 Canton, OH 44720

Chase Bank Attn: Bankruptcy P.O. Box 15298 Wilmington, DE 19850

Crystal Clinic Orthopaedic 444 N. Main Street Akron, OH 44310-3110

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Crystal Clinic, Inc. P.O. Box 75575 Cleveland, OH 44101-4755

Diversified Consultants P.O. Box 551268 Jacksonville, FL 32255

Edwin Shaw Hospital Dept. 781113 P.O. Box 78000 Detroit, MI 48278-1113 Fidelity Properties, Inc. 220 E. Main Street Alliance, OH 44601

Finance System of Toledo P.O. Box 351297 Toledo, OH 43635-1297

First Federal Credit & Collections 24700 Chagrin Blvd., Suite 205 Cleveland, OH 44122

GC Services Limited Partnership P.O. Box 930824 Wixom, MI 48393-0824

IC Systems, Inc. 444 Highway 96 East St. Paul, MN 55127

LGM Co., Inc. 245 Broadway Avenue Bedford, OH 44146

Midland Credit Management, Inc. 2365 Northside Drive, Suite 300 San Diego, CA 92108

Nationstar Mortgage, LLC 8950 Cypress Waters Blvd. Coppell, TX 75019

Navient Attn: Claims Dept. P.O. Box 9500 Wilkes-Barre, PA 18773

Northland Group, Inc. P.O. Box 390905 Minneapolis, MN 55439

Regional Income Tax Agency P.O. Box 477900 Broadview Heights, OH 44147

Richard J. Sykora, Esq. Manley Deas Kochalski, LLC P.O. Box 165028 Columbus, OH 43216-5028

Santander Consumer USA P.O. Box 961245 Ft. Worth, TX 76161

Summit County Court of Common Pleas 205 S. High Street Akron, OH 44308